FORM D

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

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NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D.

SECTION 4(6), AND/OR

ſ	OMB APPR	OVAL	7
	OMB Number:	3235-007	76
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190 JON LIMITED OFFERING EXEMPTION
lame of Offering Check it this is an amendment and name has changed, and indicate change.)
American Superior Building Products Inc Private Placement Promissory Notes with Options
Filing Under (Check box(es) that apply):
Type of Filing: New Filing Amendment
A. BASIC IDENTIFICATION DATA
. Enter the information requested about the issuer
Name of Issuer (check if this is an amendment and name has changed, and indicate change.)
American Superior Building Products Inc
Address of Executive Offices (Number and Street, City, State, Zip Code) Telephone Number (Including Area Code)
1285 S.W. Martin Highway, Palm City, Florida, 34990 (772) 539-0894
Address of Principal Business Operations (Number and Street, City, State, Zip Code) Telephone Number (Including Area Code) if different from Executive Offices)
Brief Description of Business
Manufacture and sell commerical and residential building components
Type of Business Organization organization corporation business trust limited partnership, already formed limited partnership, to be formed other (please specify): PROCESSED
Month Year Actual or Estimated Date of Incorporation or Organization: 0 3 0 6 2 Actual Estimated
urisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State: CN for Canada; FN for other foreign jurisdiction) FINANCIAL

GENERAL INSTRUCTIONS

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C.

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

This notice shall be $\psi = 12^{-10}$. Late reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have the form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been probe to a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This police shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION-

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

> Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

A. BASIC IDENTIFICATION DATA Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer. Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. General and/or ■ Beneficial Owner **Z** Executive Officer Director Check Box(es) that Apply: **✓** Promoter Managing Partner Full Name (Last name first, if individual) Saintsing, David Business or Residence Address (Number and Street, City, State, Zip Code) 4285 S.W. Martin Highway, Palm City, Florida, 34990 Check Box(es) that Apply: Beneficial Owner Executive Officer Director ✓ Promoter General and/or Managing Partner Full Name (Last name first, if individual) Heilbronner, Fredric D. Business or Residence Address (Number and Street, City, State, Zip Code) 4285 S.W. Martin Highway, Palm City, 34990 ✓ Promoter General and/or Check Box(es) that Apply: Managing Partner Full Name (Last name first, if individual) Gozzo, Paul M. Business or Residence Address (Number and Street, City, State, Zip Code) 113 Inner Harbour Way, Jupiter, FL, 33477 Check Box(es) that Apply: Promoter General and/or Managing Partner Full Name (Last name first, if individual) Moran, Michael C. Business or Residence Address (Number and Street, City, State, Zip Code) 4285 S.W. Martin Highway, Palm City, Florida, 34990 Check Box(es) that Apply: ✓ Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Koplas, Michael R. Business or Residence Address (Number and Street, City, State, Zip Code) 4285 S.W. Martin Highway, Palm City, Florida, 34990 Check Box(es) that Apply: Promoter General and/or Managing Partner Full Name (Last name first, if individual) Rizzotto, John Business or Residence Address mber and Street, City, State, Zip Code) 4921 S.E. Pompano Terraco, Stuart, FL, 34997 Check Box(es) that Apply: Promoter Director General and/or Managing Partner Full Name (Last name first, if individual) P.M.G. Capital, LLC Business or Residence Address (Number and Street, City, State, Zip Code) 4285 S. W. Martin Highway, Palm City, FL, 34990 (Use blank sheet, or copy and use additional copies of this sheet, as necessary)

					B. I	NFORMAT	ION ABOU	T OFFERI	NG		, ,,		
					4 1	10. 4	3.4 3 .		41.1. cr.	· 0		Yes	No
1.	Has the	issuer sole	d, or does t			u, to non-a Appendix				-		X	
2.	What is	the minim	num investr					-				s 10,	00.00
	***************************************	,,,,		itelite iliae v	60 4500	prod nom t	,					Yes	No
3.		-	permit join		-							K	
4.	If a pers or states a broke	sion or sime on to be list, list the na r or dealer	ilar remune sted is an as ame of the b , you may s	cration for s sociated pe broker or de set forth the	solicitation rson or age caler. If me	of purchase ent of a brok ore than five	ers in conn ter or deale e (5) persor	ection with r registered as to be list	sales of sec I with the S ed are asso	curities in t SEC and/or	irectly, any he offering, with a state ons of such		
Full	l Name (Last name	first, if ind	ividual)									
Bus	Business or Residence Address (Number and Street, City, State, Zip Code)												
Nan	ne of As	sociated B	roker or De	aler									
Stat			Listed Ha										
	(Check	"All State:	s" or check	individual	States)			***************************************	***************************************	***************************************		☐ AI	l States
	AL IL MT	AK IN NE SC	IA NV SD	KS NH TN	CA KY NJ TX	CO LA NM UT	ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	MS OR WY	MO PA PR
Ful	l Name (Last name	first, if ind	ividual)									
Bus	siness or	Residence	Address (Number an	d Street, C	ity, State,	Zip Code)			· · · ·			
Nan	ne of As	sociated B	roker or De	aler	·	.				·	<u> </u>		
Stat	es in Wi	ich Persor	ı Listed Ha	s Solicited	or Intends	to Solicit	Purchasers	<u>.</u>		·	·····	•	
	(Check	"All State:	s" or check	individual	States)						***************************************	□ AI	States
	AL IL MT RI	AK IN NE SC	AZ IA NV SD	AR KS NH TN	KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	MS OR WY	ID MO PA PR
Fuli	l Name (Last name	first, if ind	ividual)				•		•	<u> </u>		
Bus	iness or	Residence	Address (Number an	d Street, C	ity, State,	Zip Code)	•					
Nan	Name of Associated Broker or Dealer												
Stat	es in Wi	ich Persor	المن Listed	s Solicited	or Intends	to Solicit	Purchasers	****			 		
	(Check "All States" or check individual States)								☐ Al	States			
	AL IL MT RI	AK IN NE SC	AZ IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	MS OR WY	MO PA PR

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and		
	Type of Security	Aggregate Offering Price	Amount Already Sold
		_	
	Debt	335,000.00	\$ 335,000.00
	Equity	\$	\$
	Common Preferred		
	Convertible Securities (including warrants)	S	\$
	Partnership Interests		\$
	Other (Specify Accompanying Stock Options for Company's Series A Common Stock		\$_0.00
	Total	335,000.00	\$ 335,000.00
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	Number Investors	Aggregate Dollar Amount of Purchases
	Accredited Investors		\$ 50,000.00
	Non-accredited Investors		\$ 285,000.00
	Total (for filings under Rule 504 only)	14	\$ 335,000.00
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.		
	Type of Offering	Type of Security	Dollar Amount Sold
	Rule 505	 	\$
	Regulation A		\$
	Rule 504	Debt w/ Options	\$_335,000.00
	Total		\$ 335,000.00
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		\$
	Printing and Engraving Costs		\$
	Legal Fees		s
	Accounting Fees		\$
	Engineering Fees		\$
	Sales Commissions (specify finders' fees separately)		s
	Other Expenses (identify)		\$
	Total	_	\$ 0.00

	C. OFFERING PRICE, NUMB	ER OF INVESTORS, EXPENSES AND USE OF P	ROCEEDS	
	b. Enter the difference between the aggregate offering and total expenses furnished in response to Part C — C proceeds to the issuer."	Question 4.a. This difference is the "adjusted gross		\$
5.	Indicate below the amount of the adjusted gross proceach of the purposes shown. If the amount for any check the box to the left of the estimate. The total of the proceeds to the issuer set forth in response to Part 6	purpose is not known, furnish an estimate and the payments listed must equal the adjusted gross		
			Payments to Officers, Directors, & Affiliates	Payments to Others
	Salaries and fees	-		_
	Purchase of real estate	-	<u></u> \$. □ \$
	Purchase, rental or leasing and installation of mach and equipment		¬\$	□\$
	Construction or leasing of plant buildings and facil	-		
	Acquisition of other businesses (including the valu offering that may be used in exchange for the asset	s or securities of another	_	
	issuer pursuant to a merger)	-	_	_
	Repayment of indebtedness			
	Working capital			
	Other (specify):			
	Column Totals		\$ 66,000.00	\$269,000.00
	Total Payments Listed (column totals added)		□ \$ <u>_</u> 33	35,000.00
		D. FEDERAL SIGNATURE	<u> </u>	
sig	issuer has duly caused this notice to be signed by the unature constitutes an undertaking by the issuer to furn information furnished by the issuer to any non-accre	ish to the U.S. Securities and Exchange Commis	sion, upon writte	
lss	ier (Print or Type)	Signature	Date /	ſ
Аг	nerican Superior Building Products Inc	David Site	4/2/	07
Na	ne of Signer (Print or Type)	Title of Signer (Rrint or Type)		
Dav	id Saintsing	Cheif Executive Officer		

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

	E. STATE SIGNATURE		
1.	Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule?	Yes	No K

- See Appendix, Column 5, for state response.
- 2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed a notice on Form D (17 CFR 239.500) at such times as required by state law.
- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Issuer (Print or Type)	Signature	Date
American Superior Building Products Inc	David Sinta	4/2/01
Name (Print or Type)	Title (Print of Type)	
David Saintsing	Cheif Executive Officer	

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

	APPENDIX									
1	Intend to non-ad	to sell coredited s in State -ltem 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)				5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)	
State	Yes	No		Number of Accredited Investors	Accredited Non-Accredited			Yes	No	
AL										
AK	-									
AZ									Г <u></u>	
AR										
CA	×		Debt - \$50,000			2	\$50,000.00		×	
СО										
СТ										
DE								1		
DC].									
FL	×		Debt - \$275,000			11	\$275,000.00		×	
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APPENDIX 4 5 2 3 1 Disqualification under State ULOE Type of security Intend to sell and aggregate (if yes, attach offering price Type of investor and explanation of to non-accredited amount purchased in State investors in State offered in state waiver granted) (Part B-Item 1) (Part C-Item 1) (Part C-Item 2) (Part E-Item 1) Number of Number of Accredited Non-Accredited Investors Yes Yes No Investors Amount No State Amount MO MT NE NVNH NJ NM Debt - \$10,000 1 \$10,000.00 NY X X NC ND ОН OK OR PA RI SCSD TN TX UT VTVAWA wv WI

				APP	ENDIX						
1	1 2 3 4								5 Disqualification		
	Inton	l 45 coll	Type of security								
	to non-a	l to sell accredited	and aggregate offering price		Type of	(if yes, attach explanation of					
		s in State I-Item I)	offered in state (Part C-Item 1)	-	amount purchased in State (Part C-Item 2)				waiver granted) (Part E-Item 1)		
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No		
WY											
PR											

 \mathbb{END}